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Bib Data Sheet

CONFIRMATION NO. 2730

SERIAL NUMBER 10/040,573	FILING DATE 11/02/2001 RULE	CLASS 713	GROUP ART UNIT 2134	ATTORNEY DOCKET NO. 021768.1152
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APPLICANTS

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** CONTINUING DATA *****

N/A

** FOREIGN APPLICATIONS *****

N/A

IF REQUIRED, FOREIGN FILING LICENSE GRANTED

** 02/05/2002

Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR COUNTRY MI	SHEETS DRAWING 3	TOTAL CLAIMS 55	INDEPENDENT CLAIMS 7
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance	Examiner's Signature <i>[Signature]</i>	Initials <i>[Initials]</i>		
Verified and Acknowledged				

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TITLE

Method and system for secure communication

FILING FEE RECEIVED 1706	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit _____
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